

SECTION 637: AFFIDAVIT RELATIVE TO ALLEGED WRONG PAYMENT
OF STATE OF HAWAII WARRANT (FORM)

1. Purpose. The purposes of the AFFIDAVIT RELATIVE TO ALLEGED WRONG PAYMENT OF STATE OF HAWAII WARRANT are:
 - (a) To obtain a sworn statement from the payee of an alleged forged WARRANT that the WARRANT written to him was not endorsed by him or anyone authorized to sign for him; that he did not receive the money directly or indirectly; and that he has no information regarding the identity of the alleged forger, except as included in the affidavit.
 - (b) To provide the Director of Finance and any prior endorsers with legal evidence on which to take necessary action to recover the amount of the forged WARRANT from payors through whom the WARRANT was negotiated.
 - (c) To provide a part of the action necessary for the issuance of a duplicate WARRANT by the State Comptroller.
2. Preparation. The form is prepared by the payee (State employees are assisted by DAGS Accounting Division and by departmental personnel where employed), with the assistance of a notary public before whom the affidavit is signed.
3. Frequency. This form is prepared whenever an allegation is made by a payee that a State WARRANT prepared in his name has been wrongly paid with his forged endorsement.
4. Distribution.
 - (a) Copy #1) To DAGS Accounting Division for transmittal to
Copy #2) B&F's Finance Division.
 - (b) Copy #3 - To DAGS Accounting Division for retention in
division file.

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ITEM NO.	DATA AND DATA INSTRUCTIONS
(1)	CASE NO. _____ - Leave blank; not applicable for initial preparation.
(2)	COUNTY OF - Enter the county in which the AFFIDAVIT is being executed.
(3)	PAYEE - Enter the name of the payee who is executing this AFFIDAVIT. Enter first name, middle initial, and last name.
(4)	NO. - Enter the State of Hawaii WARRANT number that was issued to the payee and which is alleged to have been wrongly paid. The WARRANT number includes the alpha fund code preceding numerics.
(5)	ISSUED ON - Enter the date of the WARRANT.
(6)	AMOUNT OF \$ - Enter the amount of the WARRANT.
(7)	RESIDED AT - Enter the address of the payee when the WARRANT was paid.
(8)	NOW RESIDE AT - Enter the current address of the payee.
(9)	ADDRESSED TO ME AT - Enter the address where the WARRANT was originally sent.
(10)	EXCEPT - Enter explanation, if any, regarding identity of the forger.
(11)	SIGNATURE - Signature(s) of person(s) claiming reimbursement. If company, person signing must include his title.
(12)	SUBSCRIBED AND SWORN TO - Signed and dated by a notary public.

January 1, 1979

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AFFIDAVIT RELATIVE TO ALLEGED WRONG PAYMENT OF
STATE OF HAWAII WARRANT
(To be executed in duplicate)

DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES

Case No. 1

STATE OF HAWAII } ss.
COUNTY OF 2

3, being first duly
sworn, deposes and says:

I am the payee of a State of Hawaii warrant,
No. 4, issued at Honolulu on 5,
in the amount of \$ 6 in my favor, and paid to the
wrong person.

At the time the warrant in question was paid, I
resided at 7, and now
reside at 8.

The letter containing the warrant, which was not
received by me, was addressed to me at 9.

I further swear that the signature appearing on
said warrant purporting to be my signature is a forgery, not
having been written by me, nor by anyone authorized to sign
my name thereto; that I have not received the money represented
by said warrant directly or indirectly, and have no information
as to the identity of the person who secured payment by forging
my signature, except 10.

I sign this affidavit in support of a claim for
reimbursement because of wrong payment of said warrant, and
understand that the making of a false affidavit or a false claim
against the State of Hawaii knowingly is punishable by imprison-
ment for not more than 20 years.

11

12

Subscribed and sworn to before me
this ____ day of _____, 19__.

Notary Public, _____ Judicial
Circuit, State of Hawaii

My Commission expires _____